# Helping APS Clients and Victims Facing Homelessness

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Adult Protective Services (APS) programs should be aware of those they are serving who are currently homeless, at great risk of becoming homeless, or previously homeless.

## **Background**

The US Department of Housing and Urban Development <u>defines four categories of</u> homelessness:

- Literally homeless (lack a fixed, regular, and adequate nighttime residence which includes residing in an emergency shelter, a place not meant for human habitation, or exiting an institution where they temporarily resided);
- Imminent risk of homelessness (will imminently lose primary nighttime residence);
- Homeless under other Federal statutes; and
- Fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, or other dangerous situations related to violence against the individual or a family member.

For more information see the National Alliance to End Homelessness' easy to read <u>analysis</u>.

According to the <u>US Interagency Council on Homelessness</u>, between 2007 and 2016 the total number of people in an emergency shelter over the age 50 increased by 23%, including a 48% increase in those age 62 and older. Almost half (47%) of people who are homeless report a disability. People with disabilities are more likely to experience homelessness than adults without disabilities and counts are generally noted to be underestimates (for more see the National Law Center on Homelessness & Poverty's <u>report</u>).

<u>Justice in Aging</u> reports that causes of homelessness include family breakdown or death, health crisis, job loss, falling behind in bills, eviction due to hoarding, selfneglect, and/or abuse. One particularly at-risk group is the younger part of the Baby Boomer cohort, around ages 50 – 65. This may be due to stagnant wages during their career, limited to no savings, disappearing defined benefit pensions, loss of home equity during the 2010 housing crash, and job loss.

Older adults who are homeless often face health conditions similar to those 15 to 20 years older, including cognitive and mobility impairments. Further, addressing these challenges while homeless is significantly harder without stable housing. People with mobility impairments may face inaccessible shelters. Services may require significant

travel and waiting in line, and there is greater risk of theft or damage to equipment such as walkers and glasses (<u>Justice in Aging</u>).

# Caregivers and Homelessness

It is a common assumption that individuals experiencing homelessness are socially isolated or estranged from family, but little research supports this view. Recent research has highlighted informal caregivers who are homeless. One study addressed two categories of informal caregivers and their experiences. The first group experienced homelessness after caring for their housed relatives. These caregivers gave up a job or subsidized housing elsewhere to provide care because they felt that the duty to care outweighed the instability. However, they faced homelessness after the relative's death or move to a higher level of care because they were required to relinquish the apartment or house, face Medicaid estate recovery, or could not regain a housing voucher or rent-controlled apartment.

A second category of older adults provided care for their housed relative while homeless themselves. Their homelessness was due to strained relationships, housing policies, or to address their own needs<sup>1</sup>. Caregivers may also be caring for a partner or relative who is homeless as well (read an account at <a href="The Caregiver Space">The Caregiver Space</a>). Programs should be aware of often hidden obstacles like caregiving, policies of buildings and programs, federal, state, and local regulations such as affordable housing program and voucher limitations, and personal history.

### **Homelessness and Victimization**

Older adults who are homeless are victims of violence at a rate ten times higher than their peers with stable housing. And, they are at considerably higher risk of sexual abuse. Those with functional impairments are particularly at risk. Increased vulnerability also comes from living in emergency shelters or on the streets creating a dangerous environment with instability, limited privacy, lack of choice, and lack of control over personal space. Social stigma and dehumanization of people who are homeless leave older adults vulnerable to attacks by bystanders, whether verbal or physical. Adding to this increased vulnerability, older adults experiencing homelessness may be reluctant to contact the police or other authorities, potentially including APS, due to past negative interactions, criminal justice history, racial bias concerns, criminalization of actions associated with homelessness, and general societal stigma<sup>2</sup>.

# **Resources for Response**

The nature of homelessness varies by community but a constant is that <u>collaboration</u> is key. Reaching out and building partnerships helps your program become aware of resources and gives APS programs an opportunity to educate partner agencies. On a recent conference call, several APS leaders discussed the challenge in receiving and sharing records with shelters. The group agreed that shelters and other organizations addressing homelessness were often not aware of APS and its roles. Building a relationship and sharing information helped overcome barriers.

<u>Hawaii's Office of the Governor's Coordinator of Homelessness</u> created infographics illustrating the state's homeless services system. These materials are shared in trainings, such as with APS, and in public reports.

In 2019, California developed the <u>Home Safe Program</u> pilot program to support housing stability for APS clients at risk of homelessness. The program includes short term financial assistance, legal services, eviction prevention, heavy cleaning, and landlord mediation. APS programs build collaborations and receive technical assistance from the state. Resources in your community may include emergency shelters focused on older adults and/or people with disabilities (see the National Center on Elder Abuse's (NCEA) blog on <u>shelters</u> and the APS TARC brief on <u>emergency housing</u>).

APS clients experiencing homelessness may face obstacles obtaining benefits. While homelessness increases the likelihood of victimization, clients may have challenges accessing Crime Victim's Compensation such as lack of knowledge of the program, documentation requirements including mailing address, and negative experiences with law enforcement. The National Health Care for the Homeless Council provides a fact sheet on the program and suggestions for overcoming challenges such as increased training and awareness. Clients with disabilities who are homeless have the right to apply for Social Security Disability Insurance and Supplemental Security Income but may face challenges such as documentation or process concerns. The Social Security Administration provides information for both clients and service providers on how to navigate the process. Other agencies in your area may also be able to help.

### **Your Turn**

- Learn about homelessness in your area. Are there groups or issues you were not aware of?
- Reach out to <u>homeless services in your community</u>. Share what APS does and how to partner.
- Find your county or state's office focusing on homelessness. Break down silos and collaborate.
- Share with your peers! Let us know your best practices or share challenges on a <u>peer</u> to <u>peer call</u>.

### **Cited Works**

<sup>&</sup>lt;sup>1</sup>Rosenwohl-Mack, S., Kushel, M., Ramsey, C., Handley, M., & Knight, K. R. (2019). "We really help, taking care of each other": Older homeless adults as caregivers. *Gerontology & Geriatric Medicine*. doi: 10.1177/2333721419894765

<sup>2</sup>Tong, M. S., Kaplan, L. M., Guzman, D., Ponath, C., & Kushel, M. B. (2019). Persistent homelessness and violent victimization among older adults in the HOPE HOME Study. *Journal of Interpersonal Violence*. doi: 10.1177/0886260519850532